

MISSOURI SCHOOL IMPROVEMENT PROGRAM

TEACHER INTERVIEWS

DIRECTIONS:

1. Complete the headings at the top of the pages. Use the positions (not names) of the persons being interviewed.
2. **ASK EACH INTERVIEWEE ALL QUESTIONS IN THE PACKET.**
3. Complete the checklists for LMCs and for Facilities on the interview sheets while walking around the facilities and grounds.
4. Check your responses to the questions: are they clear, complete thoughts, and legible?
5. Follow the Team Leader's directions for distributing the interview sheets to the appropriate committees.

District _____

Building _____

Team Member _____

Staff Interviewed (1) _____

(2) _____

(3) _____

(4) _____

(5) _____

6.1.1**(T1)** How do you know your curriculum is preparing students for the MAP?**(T2)** How is your curriculum articulated with other grades and subject areas?**(T3)** How do you use your curriculum guides?

6.1.2

(T4) What training in writing or developing curriculum have you participated in during the last two years?

(T5) Who answers your questions or helps you as you implement the curriculum?

6.1.3

(T6) Could you give me an example of an equity concept and how you teach it?

(T7) What workplace-readiness skills do you teach in your classes?

6.2.1

(T8) How are test-taking skills taught?

(T9) What staff development activities directly related to the assessment program have you participated in recently?

6.2.5

(T10) What major changes has the district made in its curriculum and instruction in the last two years, based on assessment information? [verification question]

Building _____**6.3.1**

(T12) What specific instructional strategies have been emphasized in your district?

(T13) Have you participated in training related to these strategies?

(T14) What support is provided when you are implementing these selected instructional strategies?

6.3.2

(T15) Which instructional strategies do you use most frequently in your classroom and which are most effective in your opinion?

6.3.3

**The next four questions are for K-3 teachers and reading specialists only.
[verification questions]**

(T16) Have clear reading goals for every grade level been established?

How is reading progress monitored?

How much time do you spend on reading instruction?

Describe the reading instruction or strategies you provide?

(T17) What assistance is provided for poor readers?

Building_____

(T18) What professional development have you received in the past two years related to reading instruction and/or current reading research?

6.3.4

(T19) What assessment information do you use to plan lessons or implement instruction?

(T20) What training have you participated in during the last two years on using student assessment data to plan instruction?

(T21) Have you implemented any changes in your classroom instructional program in the last two years? Why were these changes made?

(T22) How do you use reading assessment information to plan instruction in your classes?

6.3.6

(T23) What services are available for at-risk students?

Building

6.7.1

(T24) What kinds of on-going/long-term professional development activities have you participated in?

6.7.2

(T25) Is participation in professional development activities used in the teacher evaluation process?

6.7.6

(T26) How is time provided for participation in professional development?

[Additional Information]

District _____

Building _____

Team Member _____

Staff Interviewed (1) _____

(2) _____

(3) _____

(4) _____

(5) _____

6.4.1**(T27) Are your essential classroom/building learning resources:**

(1) (2) (3) (4) (5)

readily available? YES/NO YES/NO YES/NO YES/NO YES/NO

sufficiently up-to-date? YES/NO YES/NO YES/NO YES/NO YES/NO

matched to curriculum objectives? YES/NO YES/NO YES/NO YES/NO YES/NO

in good repair? (no missing pages,
no broken bindings, clean) YES/NO YES/NO YES/NO YES/NO YES/NO**[Provide additional information for any “NO” response:]****6.4.4****(T28)** How do you use technology in your classroom instruction?**6.8.1****(T29)** Who teaches information literacy/research skills to students in this school?**(T30)** Are there times when the LMC is not available to your students? (If the answer is “yes”, ask why.)

6.8.3

(T31) How well do the LMC resources support your instructional program?

6.8.1 TEAM MEMBER CHECKLIST FOR LMCs

[Complete a checklist for each LMC visited.]

Team observations indicate the LMC in _____ **[school name]** has:

YES / NO -appropriate facilities (attractive, comfortable, encourage student and staff use)

YES / NO -age-appropriate furnishings (chairs, tables, height of shelves)

YES / NO -appropriate, secured shelving

YES / NO -adequate storage/work space (for librarian)

YES / NO -seating space for minimum of two (2) classes (based on average class size in building)

YES / NO -most books in “good” condition (all pages attached, spine not torn or
frayed, no torn pages, white paper)

YES / NO -socially- and culturally-diverse resources

YES / NO -age-appropriate resources

[If “No” is selected, provide additional information regarding your observations.]

[Additional Information]

District _____

Building _____

Team Member _____

Staff Interviewed (1) _____

(2) _____

(3) _____

(4) _____

(5) _____

6.6.1**(T32)** When and how have you received instruction on the district's code of conduct or disciplinary policies?

[Additional Information]

District _____

Building _____

Team Member _____

Staff Interviewed (1) _____

(2) _____

(3) _____

(4) _____

(5) _____

8.9.1**(T33)** Is your building:

	(1)	(2)	(3)	(4)	(5)
-clean?	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
-well-maintained?	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
-appropriate for your program?	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
-adequately wired for technology?	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO

[Provide additional information for any “NO” response:]**8.10.1 – 8.10.3****(T34)** Are you aware of any safety issues? **[Describe any safety issue thoroughly.]**

TEAM MEMBER OBSERVATION CHECKLIST

Name of Building _____

[Rate the following items in each building visited.]

8.9 BUILDING CONDITIONS

[Circle (A)ppropriate or (I)nappropriate.]

- A / I lighting/heating/ventilation
- A / I cleanliness
- A / I general state of repair/maintenance
- A / I entrance accessible to individuals with disabilities
- A / I restroom(s) accessible to individuals with disabilities
- A / I generally appropriate for educational programs
- A / I of adequate size for the number of students

- A / I indoor recreation facilities
- A / I outdoor recreation/play areas—fences, game areas, equipment, surfaces
- A / I LMC—size, storage space, furniture
- A / I guidance office—accessible, affords privacy
- A / I health/first aid office—permits continuous supervision of ill students
- A / I infrastructure for technology

[Explain the situation for any “Inappropriate” response.]

8.10 SAFETY

- YES / NO -fire extinguishers—recent inspection/test?
- YES / NO -emergency exiting procedures are posted in each room by the exit?
- YES / NO -lighted exit signs?
- YES / NO -science laboratory—proper storage for chemicals, eye-wash station (no eye-wash bottles), chemical/fire blankets in labs using a heat source, hooded ventilation and safety glasses?
- YES / NO -industrial technology shop(s)—safety glasses, machine guards, safety rules posted, safety zones marked, combustibles properly stored, appropriate ventilation?
- YES / NO -agricultural education shop(s)—safety glasses, machine guards, safety rules posted, safety zones marked, combustibles properly stored, appropriate ventilation?

[Explain any “NO” response.]

